



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene
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July 5, 2007

Public Health & Emergency Preparedness Bulletin: # 2007:26
Reporting for the week ending 06/30/07 (MMWR Week #26)

Current Threat Levels:

National: Yellow (ELEVATED) *The threat level in the airline sector is Orange (HIGH)
Maryland: Yellow (ELEVATED)

REVIEW OF DISEASE SURVEILLANCE FINDINGS

COMMUNICABLE DISEASE SURVEILLANCE CASE REPORTS (confirmed, probable and suspect):

Meningitis:	<u>Aseptic*</u>	<u>Meningococcal*</u>	*(non-suspect cases)
New cases:	* Data not yet released from Division of Communicable Disease Surveillance		
Prior week:	* Data not yet released from Division of Communicable Disease Surveillance		
Week#26, 2006:	4	-	

OUTBREAKS: 3 outbreaks were reported to DHMH during MMWR Week 26 (June 24-30, 2007):

1 Gastroenteritis outbreak

1 outbreak of GASTROENTERITIS associated with an Assisted Living Facility

2 Respiratory illness outbreaks

1 outbreak of AFRD/PNEUMONIA associated with a School

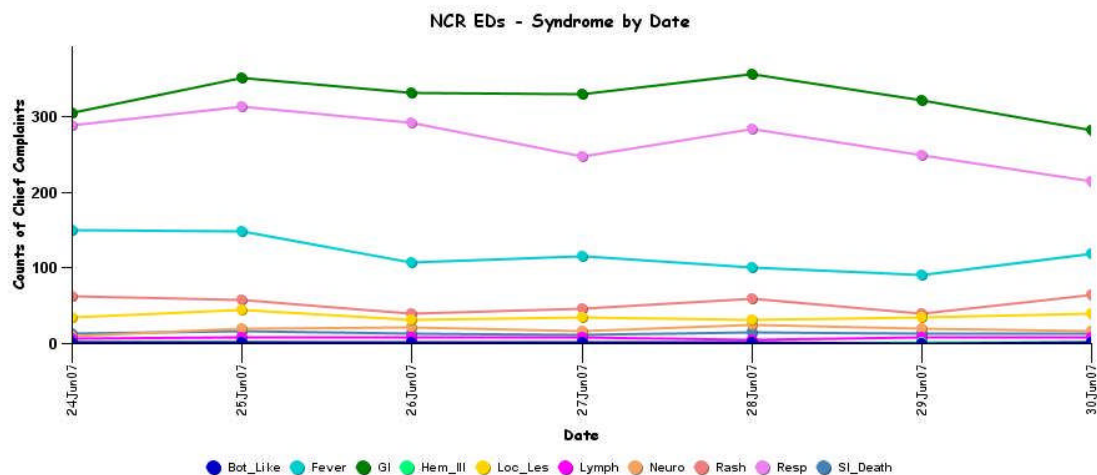
1 outbreak of AFRD/PNEUMONIA associated with a Nursing Home

SYNDROMIC SURVEILLANCE REPORTS:

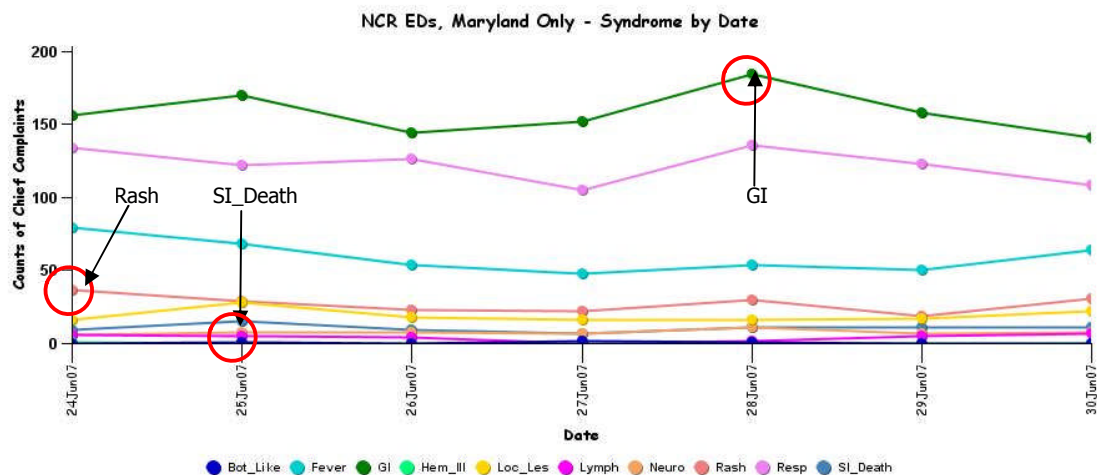
ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics):

Graphical representation is provided for all syndromes, excluding the "Other" category, all age groups, and red alerts only.

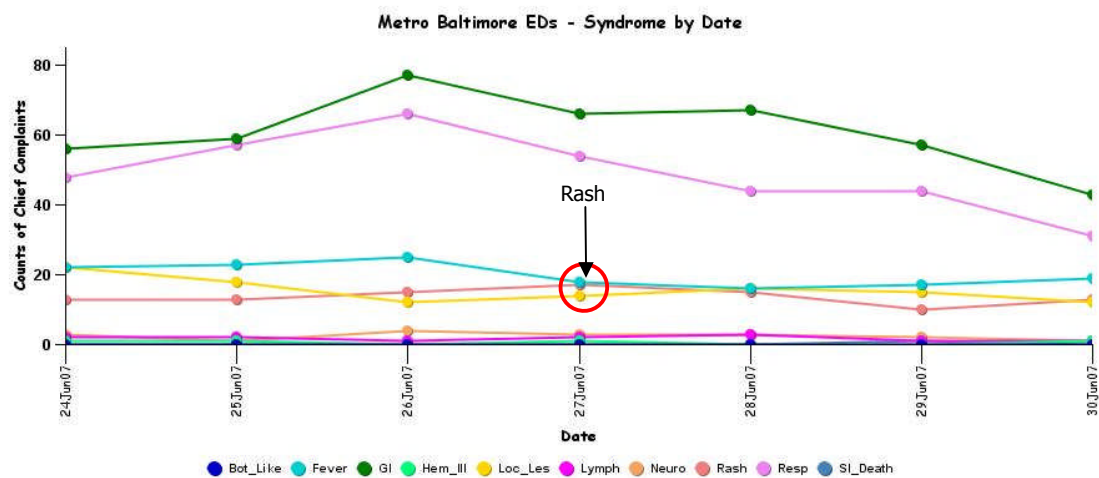
Overall, no suspicious patterns of illness were identified. Track backs to the health care facilities yielded no suspicious patterns of illness. * Note: ESSENCE – ANCR Spring 2006 (v 1.3) now uses syndrome categories consistent with CDC definitions.



* Includes EDs in all jurisdictions in the NCR (MD, VA, DC) under surveillance in the ESSENCE system

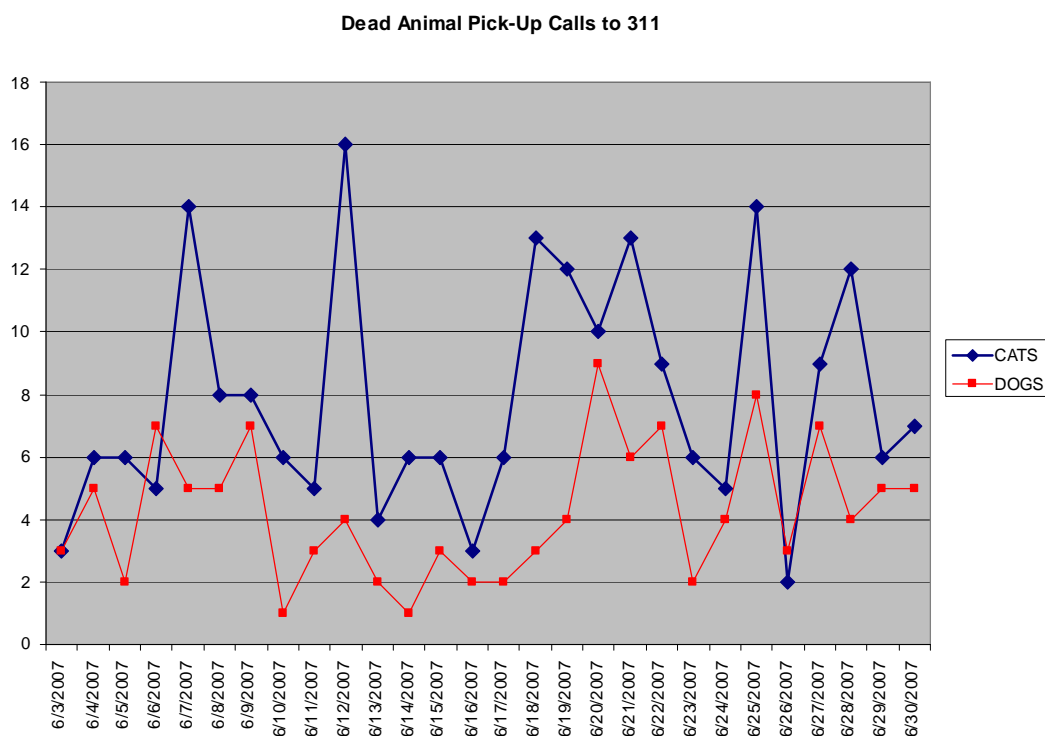


* Includes only Maryland EDs in the NCR (Prince George's and Montgomery Counties) under surveillance in the ESSENCE system



* Includes EDs in the Metro Baltimore region (Baltimore City and Baltimore County) under surveillance in the ESSENCE system.

Baltimore City Syndromic Surveillance Project: No suspicious patterns in the medic calls, ED Syndromic Surveillance and the animal carcass surveillance. Graphical representation is provided for animal carcass surveillance 311 data.

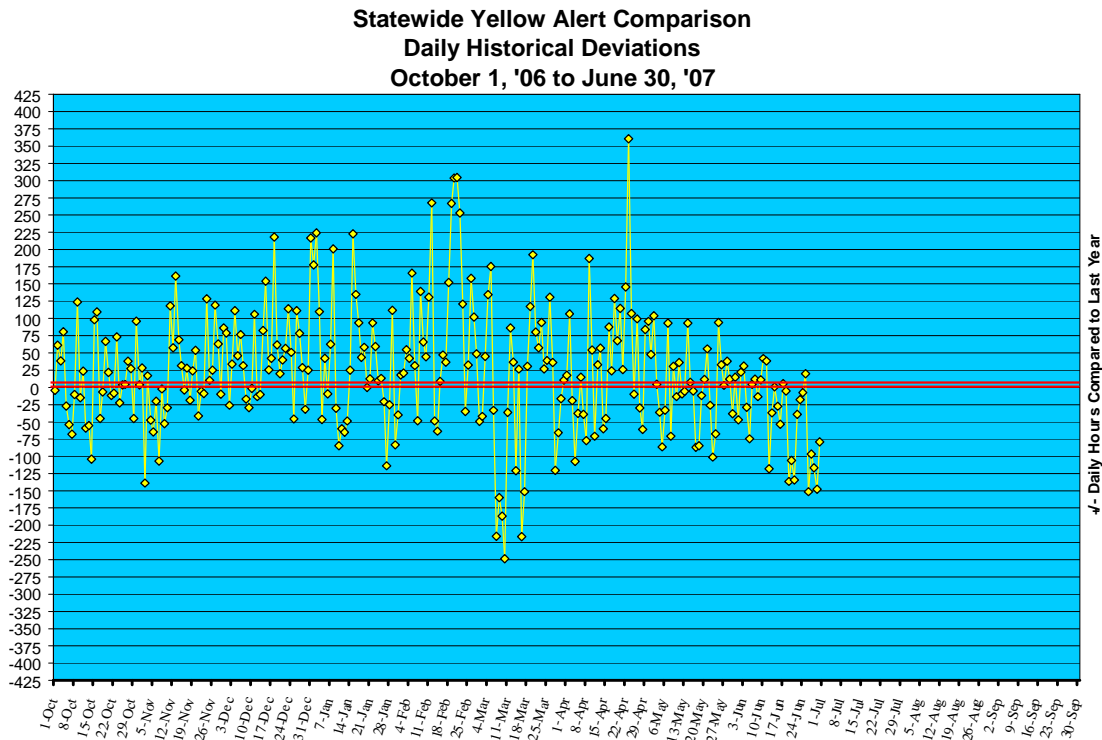


REVIEW OF MORTALITY REPORTS:

OCME: OCME reports no suspicious deaths related to BT for the week

REVIEW OF EMERGENCY DEPARTMENT UTILIZATION

YELLOW ALERT TIMES (ED DIVERSION): The reporting period begins 10/01/06.

**NATIONAL DISEASE REPORTS:**

SALMONELLOSIS, SEROTYPE WANDSWORTH (North America): 29 Jun 2007, The FDA is warning consumers not to eat Veggie Booty snack food, marketed by Robert's American Gourmet, due to possible contamination with Salmonella Wandsworth bacteria. FDA advises consumers to throw away any Robert's American Gourmet brand Veggie Booty they have in their home. Veggie Booty is sold in a flexible plastic foil bag in 4 ounce, 1 ounce, and 1/2 ounce packages. Veggie Booty is often consumed by children, so parents are encouraged to watch their children, and seek medical care if they observe signs of illness. This warning is based on 52 reports of illness across 17 states, beginning in March 2007. Almost all the illnesses have occurred in children under 10 years old, with the most cases in toddlers. Most persons had reported bloody diarrhea; 4 were hospitalized. FDA learned of the illnesses on Jun 27 from the CDC, which conducted an investigation of the illnesses with state and local health officials. The outbreak is considered likely to be ongoing. States reporting illnesses include: California (7 cases), Colorado (5 cases), Connecticut (1 case), Georgia (1 case), Indiana (1 case), Massachusetts (3 cases), Minnesota (2 cases), New Hampshire (2 cases), New Jersey (2 cases), New York (13 cases), Oregon (1 case), Pennsylvania (3 cases), Tennessee (1), Texas (1), Vermont (3 cases), Washington (4 cases), and Wisconsin (2 cases). Robert's American Gourmet, of Sea Cliff, NY, which markets Veggie Booty, and its contract manufacturer, are fully cooperating with FDA's investigation into the cause of the contamination. Manufacturing and distribution of this product has ceased, and Robert's American Gourmet is recalling all potentially contaminated product, including all expiration dates and lot codes. The product is sold in all 50 states and Canada at retail locations and over the internet. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents)* Non-suspect case

INTERNATIONAL DISEASE REPORTS:

SALMONELLOSIS, WORKERS (Russia): 25 Jun 2007, A total of 444 construction workers laid up with salmonellosis remain in hospitals in the Moscow region, the press and information department of the Ministry for Emergency Situations told Tass. A total of 444 workers employed at Sheremetyevo-3 terminal in Moscow, the IKEA-Khimki Business Park

construction sites, had been hospitalized since Jun 20, a representative of the Ministry for Emergency Situations said. Managers of the ENKA Company have been questioned within the framework of an investigation into mass food poisoning of construction workers employed at Terminal 3 at Sheremetyevo airport. Almost all of the workers arrived in Russia from Turkey, Tajikistan, Uzbekistan, and Kyrgyzstan to work on construction sites in Moscow. They lived on the premises of Ozero Krugloye recreation center in the Solnechnogorsk district. (Food Safety Threats are listed in Category B on the CDC list of Critical Biological Agents)* Non-suspect case

CRIMEAN-CONGO HEMORRHAGIC FEVER (Russia): 29 Jun 2007, A man has died as a result of Crimean-Congo hemorrhagic fever (CCHF) virus infection in Ingushetia, according to a primary care physician in the Nazr-Kort district. Currently the medical authorities in Ingushetia are striving to alert the general population to the dangers of CCHF virus infection and are working to increase awareness of protective measures and risk avoidance. The first outbreak of CCHF in Ingushetia occurred in September-October 2004. At that time between 3 and 6 people died as a result of CCHF. The virus is showing up again this year. CCHF is an infectious disease characterized by fever, severe general discomfort, a hemorrhagic rash in skin and mucous membranes, and hemorrhage. Sporadic cases occur in the southern parts of Russia, Ukraine, Moldova, parts of Central Asia, the southern part of Kazakhstan, and parts of Asia, Africa and southern Europe. (Viral hemorrhagic fevers are listed in Category A on the CDC list of Critical Biological Agents)* Non-suspect case

AVIAN INFLUENZA-RELATED REPORTS

WHO update: The WHO-confirmed global total of human cases of H5N1 avian influenza virus infection as of 29 June 2007 stands at 317, of which 191 have been fatal.

AVIAN INFLUENZA, HUMAN (Egypt): 25 Jun 2007, As of Jun 25, the Egyptian Ministry of Health and Population has confirmed a new human case of avian influenza A(H5N1) virus infection. The case has been confirmed by the Egyptian Central Public Health Laboratory and by the WHO H5 Reference Laboratory, US Naval Medical Research Unit No.3 (NAMRU-3). The case is a 4 year old boy from Qena Governorate. He developed symptoms on Jun 20 and was admitted to hospital on Jun 21. He is receiving treatment and is in stable condition. Initial investigations into the source of his infection indicate exposure to dead poultry. Of the 37 cases confirmed to date in Egypt, 15 have been fatal.

AVIAN INFLUENZA, HUMAN (Indonesia): 25 Jun 2007, As of Jun 25, the Ministry of Health of Indonesia has announced a new case of human infection of H5N1 avian influenza. A 3 year old girl from Riau Province developed symptoms on Jun 18 and has since recovered. Investigations into the source of her infection indicate exposure to sick and dead poultry. Of the 101 cases confirmed to date in Indonesia, 80 have been fatal.

AVIAN INFLUENZA, HUMAN (Viet Nam): 27 Jun 2007, A 40 year old man from Viet Nam's southern Bac Lieu province has been hospitalized after showing bird flu symptoms, the local newspaper Young People reported on Jun 26. The man, under treatment at the Tropical Disease Hospital in southern Ho Chi Minh City, has suffered from severe respiratory problems over the past few days after eating a dead duck. He works for wages for a local man who is raising 350 ducklings, some of which having died recently. The provincial Veterinary Bureau said 3 flocks of ducks in Bac Lieu's Hong Dan district died in the last few days after exhibiting bird flu symptoms. They were raised in the neighboring province of Soc Trang and were being moved to Bac Lieu. Specimens from the man and the dead ducks are being tested for bird flu virus strain H5N1. Since late 2005, Viet Nam has confirmed 5 human cases of bird flu infection, of whom 2 have died, 2 from the northern provinces of Vinh Phuc and Thanh Hoa have been discharged from hospital, and one from northern Thai Nguyen province is still under treatment at the Tropical Disease Hospital in the capital of Hanoi. All of the bird flu patients have either had direct contact with or eaten dead fowl, Vietnamese deputy minister of health Trinh Quan Huan said recently, noting that H5N1 has yet to mutate, and the antiviral Tamiflu is still effective in treating bird flu patients.

AVIAN INFLUENZA, HUMAN (Viet Nam): 29 Jun 2007, As of Jun 29, the Ministry of Health in Viet Nam has confirmed 2 new human cases of influenza A(H5N1) virus infection, the first human cases to have been reported from Viet Nam since November 2005. Both cases have been confirmed by the National Institute of Hygiene and Epidemiology (NIHE) and by the WHO H5 Reference Laboratory, US Centers for Disease Control and Prevention (CDC). The first case is a 29 year old man from Vinh Phuc Province. He developed symptoms on May 10 some days after slaughtering poultry for a wedding. He was admitted to hospital on May 15 and was discharged on June 11. The second human is a 19 year old man from Thai Nguyen Province. He developed symptoms on May 20 following exposure to poultry at a slaughter house. He was admitted to hospital on May 25 and remains in hospital in a stable condition. To date, there has been no evidence of an epidemiological link between the human cases, and no evidence of infection in close contacts of the cases. These human cases have coincided with a large number of new poultry outbreaks of highly pathogenic avian influenza reported in Viet Nam during May and June this year.

*Cases and outbreaks will be cited for suspect level with regards to suspicion of BT threat. Therefore, cases and outbreaks will be categorized as "Determined BT", "Suspect" or "Non-suspect".

NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a

potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

Questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail me. If you have information that is pertinent to this notification process, please send it to me to be included in the routine report.

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